

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14000007539

Entity Name: FRIENDS OF AMERICAN BEACH INC.**Current Principal Place of Business:**5406 LEONARD STREET
FERNANDINA BEACH, FL 32034**Current Mailing Address:**POST OFFICE BOX 16552
FERNANDINA BEACH, FL 32035 US**FEI Number:** 30-0837466**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GILYARD, ERVING
5406 LEONARD STREET
FERNANDINA BEACH, FL 32034 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name JONES, CARLTON D.
Address 95580 BURNEY ROAD
City-State-Zip: FERNANDINA BEACH FL 32034

Title TREASURER
Name STATON, JAMES D. JR.
Address 5425 LEE STREET
City-State-Zip: FERNANDINA BEACH FL 32034

Title DIRECTOR
Name JONES, EVELYN M
Address 1748 JULIA STREET
City-State-Zip: FERNANDINA BEACH FL 32034

Title DIRECTOR
Name GILYARD, ALLEAN DELORIS
Address 5406 LEONARD STREET
City-State-Zip: FERNANDINA BEACH FL 32034

Title VP
Name ADAMS, HENRY LEE JR.
Address 5467 OCEAN BLVD.
City-State-Zip: FERNANDINA BEACH FL 32034

Title SECRETARY
Name GILYARD, ERVING
Address 5406 LEONARD STREET
City-State-Zip: FERNANDINA BEACH FL 32034

Title ASST. TREASURER
Name FOWLER, SHERAN
Address 6811 HANFORD STREET
City-State-Zip: JACKSONVILLE FL 32219

Title DIRECTOR
Name JONES, CAROLYN DENISE
Address 5431 OCEAN BLVD.
City-State-Zip: FERNANDINA BEACH FL 32034

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ERVING GILYARD**SECRETARY****03/18/2023**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name PRICE, WILLIAM
Address 2505 BEAR PAW CT.
City-State-Zip: ST. SUGUSTINE FL 32092

Title DIRECTOR
Name HUGHES, ANTHONY
Address 441 WEST 16TH STREET
City-State-Zip: JACKSONVILLE FL 32206

Title DIRECTOR
Name JENNINGS, MARJORIE ANN
Address 5456 LEONARD STREET
City-State-Zip: FERNANDINA BEACH FL 32034

Title DIRECTOR
Name HUGHES, ANNETT ,
Address 441 WEST 16TH STREET
City-State-Zip: JACKSONVILLE FL 32206